

**Fill in this information to identify the case:**

United States Bankruptcy Court for the:

**NORTHERN DISTRICT OF TEXAS**

Case number (if known): \_\_\_\_\_ Chapter **11**

☐ Check if this is an amended filing

**Official Form 201**

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

**06/24**

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, Instructions for Bankruptcy Forms for Non-Individuals, is available.

1. Debtor's name **KND Hospitality Company, Inc.**
2. All other names debtor used in the last 8 years **dba Naborly Provisions**
- Include any assumed names, trade names and *doing business as* names
3. Debtor's federal Employer Identification Number (EIN) **8 5 - 1 9 6 8 5 3 1**
4. Debtor's address
- | Principal place of business                  | Mailing address, if different from principal place of business              |
|--|---|
| <b>1113 Smirl Drive</b><br>Number Street     | Number Street   |
|  | P.O. Box  |
|  |   |
| <b>Heath TX 75032</b><br>City State ZIP Code | City State ZIP Code   |
| <b>Rockwall</b><br>County                    | Location of principal assets, if different from principal place of business |
|  | Number Street   |
|  |   |
|  | City State ZIP Code   |
5. Debtor's website (URL) \_\_\_\_\_
6. Type of debtor
- ☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
- ☐ Partnership (excluding LLP)
- ☐ Other. Specify: \_\_\_\_\_

Debtor **KND Hospitality Company, Inc.**

Case number (if known) \_\_\_\_\_

**7. Describe debtor's business****A. Check one:**

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

**B. Check all that apply:**

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

**C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>**7 2 2 3**8. Under which chapter of the Bankruptcy Code is the debtor filing?****Check one:**

- ☐ Chapter 7
- ☐ Chapter 9
- ☒ Chapter 11.

**Check all that apply:**

- ☒ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725 (amount subject to adjustment on 4/01/25 and every 3 years after that).
- ☒ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and it chooses to proceed under Subchapter V of Chapter 11.
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy Under Chapter 11 (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**☒ No☐ Yes. District \_\_\_\_\_

When \_\_\_\_\_

Case number \_\_\_\_\_

MM / DD / YYYY

District \_\_\_\_\_

When \_\_\_\_\_

Case number \_\_\_\_\_

MM / DD / YYYY

District \_\_\_\_\_

When \_\_\_\_\_

Case number \_\_\_\_\_

MM / DD / YYYY

If more than 2 cases, attach a separate list.

Debtor **KND Hospitality Company, Inc.**

Case number (if known) \_\_\_\_\_

**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**

List all cases. If more than 1, attach a separate list.

☒ No

☐ Yes.

Debtor \_\_\_\_\_

Relationship \_\_\_\_\_

District \_\_\_\_\_

When \_\_\_\_\_

MM / DD / YYYY

Case number, if known \_\_\_\_\_

Debtor \_\_\_\_\_

Relationship \_\_\_\_\_

District \_\_\_\_\_

When \_\_\_\_\_

MM / DD / YYYY

Case number, if known \_\_\_\_\_

**11. Why is the case filed in this district?**

*Check all that apply:*

☒

Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.

☐

A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**

☒ No

☐ Yes.

Answer below for each property that needs immediate attention. Attach additional sheets if needed.

**Why does the property need immediate attention?**

*(Check all that apply.)*

☐

It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? \_\_\_\_\_

☐

It needs to be physically secured or protected from the weather.

☐

It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐

Other \_\_\_\_\_

**Where is the property?**

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

**Is the property insured?**

☐ No

☐ Yes.

Insurance agency \_\_\_\_\_

Contact name \_\_\_\_\_

Phone \_\_\_\_\_

**Statistical and administrative information**

**13. Debtor's estimation of available funds**

*Check one:*

☒

Funds will be available for distribution to unsecured creditors.

☐

After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

Debtor **KND Hospitality Company, Inc.**

Case number (if known) \_\_\_\_\_

- |  |   |  |  |
|--|---|--|--|
| <b>14. Estimated number of creditors</b> | <input checked="" type="checkbox"/> 1-49                  | <input type="checkbox"/> 1,000-5,000                 | <input type="checkbox"/> 25,001-50,000                 |
|  | <input type="checkbox"/> 50-99                            | <input type="checkbox"/> 5,001-10,000                | <input type="checkbox"/> 50,001-100,000                |
|  | <input type="checkbox"/> 100-199                          | <input type="checkbox"/> 10,001-25,000               | <input type="checkbox"/> More than 100,000             |
|  | <input type="checkbox"/> 200-999                          |  |  |
| <b>15. Estimated assets</b>              | <input type="checkbox"/> \$0-\$50,000                     | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
|  | <input type="checkbox"/> \$50,001-\$100,000               | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
|  | <input checked="" type="checkbox"/> \$100,001-\$500,000   | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
|  | <input type="checkbox"/> \$500,001-\$1 million            | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |
| <b>16. Estimated liabilities</b>         | <input type="checkbox"/> \$0-\$50,000                     | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
|  | <input type="checkbox"/> \$50,001-\$100,000               | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
|  | <input type="checkbox"/> \$100,001-\$500,000              | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
|  | <input checked="" type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |

### Request for Relief, Declaration, and Signatures

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

- 17. Declaration and signature of authorized representative of debtor**
- ☒ The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
  - ☒ I have been authorized to file this petition on behalf of the debtor.
  - ☒ I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **10/01/2024**  
MM / DD / YYYY

**X /s/ Krista Nabors Dick**

Signature of authorized representative of debtor

**Krista Nabors Dick**

Printed name

**Owner**

Title

**18. Signature of attorney**

**X /s/ Gregory W. Mitchell**

Signature of attorney for debtor

Date **10/01/2024**

MM / DD / YYYY

**Gregory W. Mitchell**

Printed name

**Freeman Law, PLLC**

Firm name

**7011 Main Street**

Number Street

**Frisco**

City

**TX**

State

**75034**

ZIP Code

**(214) 924-3124**

Contact phone

**gmitchell@freemanlaw.com**

Email address

**00791285**

Bar number

**TX**

State